

ORDER FOR SUPPLIES OR SERVICES (Contractor must submit four copies of invoice.)						Form Approved OMB No. 0704-0187 Expires Jun 30, 1997		PAGE 1 OF 4					
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.													
PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES. SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.													
1. CONTRACT/PURCH ORDER NO. N00383-02-G-003H			2. DELIVERY ORDER NO. UBV6		3. DATE OF ORDER (YYMMDD) 2004 FEB 26		4. REQUISITION/PURCH REQUEST NO. YPE04007000511		5. PRIORITY DOA7				
6. ISSUED BY CODE SP0900 Defense Supply Center Columbus 3990 E.Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PCCDBJY (614)692-7482 / FAX: (614)692-3263 E-mail: Charles.Jordan@dla.mil				7. ADMINISTERED BY (If other than 6) CODE S0513A DCMA SANTA ANA ROOM 813A 34 CIVIC CENTER PLAZA SANTA ANA CA 92701-4056 CRITICALITY: C				8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)					
9. CONTRACTOR CODE 59211 PARKER HANNIFIN CUSTOMER SUPPORT IN 14300 ALTON PRKY IRVINNE CA 92618 Vendor's Copy was sent EDI. Do not Duplicate shipment.				FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) 200 DAYS ARO		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED					
NAME AND ADDRESS				12. DISCOUNT TERMS NET 30 days		13. MAIL INVOICES TO See Block 15							
14. SHIP TO CODE See Schedule - Do Not Ship to Address in Block 6				15. PAYMENT WILL BE MADE BY CODE HQ0339 HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T				MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER					
16. TYPE OF ORDER		DELIVERY <input checked="" type="checkbox"/>		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.									
		PURCHASE		Reference your offer dated 2004 FEB 19, M2004011071 and furnish the following on terms specified herein.									
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.													
NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYMMDD) _____ <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:													
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE EG: 97X4930 5CE0 001 26.0 S33150													
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT		22. UNIT PRICE		23. AMOUNT	
		Remarks: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.				TOTAL: 15							
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle. <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____				24. UNITED STATES OF AMERICA Russell Edwards PCCDCEG BY: <i>Russell Edwards</i> CONTRACTING/ORDERING OFFICER				25. TOTAL \$ 5394.60		29. DIFFERENCE			
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____				27. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		28. D.O. VOUCHER NO. 32. PAID BY		30. INITIALS		33. AMOUNT VERIFIED CORRECT FOR			
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				34. CHECK NUMBER		35. BILL OF LADING NO.			
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.			

CONTINUATION SHEET	Order Number: N00383-02-G-003H-UBV6	PAGE 2	OF PAGES 4
<div data-bbox="238 237 1166 300"><p>Supplies and Packaging - Inspection and Acceptance Address: 82106</p></div> <div data-bbox="284 336 756 459"><p>PARKER HANNIFIN CORPORATION DIV CONTROL SYSTEMS DIVISION - 14300 ALTON PARKWAY IRVINE CA 92618-1898</p></div> <div data-bbox="77 525 1039 556"><p>All Terms and Conditions of B.O.A. #N00383-02-G-003H applies.</p></div> <div data-bbox="77 590 553 621"><p>F.O.B. Point: Irvins, CA 92714</p></div> <div data-bbox="77 655 613 686"><p>Government Inspection of Supplies:</p></div> <div data-bbox="77 720 459 844"><p>Parker Hannifin Control Systems Division 14300 Alton Parkway Irvine, CA 92618-1898</p></div> <div data-bbox="77 877 628 909"><p>Government Inspection of Packaging:</p></div> <div data-bbox="77 942 459 1066"><p>Parker Hannifin Control Systems Division 14300 Alton Parkway Irvine, CA 92618-1898</p></div> <div data-bbox="77 1100 505 1131"><p>Quantity Variance +10 / -10</p></div>			

SECTION B

PR YPE04007000511
NSN 5945-00-614-3978

ITEM DESCRIPTION:

SOLENOID,ELECTRICAL

THE USE OF ANY CLASS I OZONE-DEPLETING SUBSTANCE (ODS) IN THE DESIGN, MANUFACTURING, TESTING, CLEANING, OR ANY OTHER PROCESS FOR THIS ITEM UNDER ANY MILITARY OR FEDERAL SPECIFICATION, STANDARD OR DRAWING REFERENCED IN THIS ITEM DESCRIPTION IS "PROHIBITED" UNLESS THE SEPARATE WRITTEN APPROVAL OF THE CONTRACTING OFFICER IS OBTAINED. THIS PROHIBITION SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT DOES NOT ALLEVIATE ANY PRODUCT PERFORMANCE REQUIREMENTS. THIS DOES NOT APPLY TO COMMERCIAL ITEMS, AS DEFINED IN "FAR 11.001" OR TO PART-NUMBERED-ONLY ITEMS.

IF THE APPLICABLE (OEM OR MILITARY) DRAWING, SPECIFICATION, STANDARD, OR QUALITY ASSURANCE PROVISION (QAP) SPECIFIES AN ACCEPTABLE QUALITY LEVEL (AQL). THE SAMPLING ACCEPTANCE NUMBER SHALL BE REDUCED TO ZERO (0). FOR EXAMPLE IF THE ACCEPT REJECT CRITERIA IS ACCEPT ON (3) DEFECTS AND REJECT ON (4) DEFECTS. THE NEW ACCEPT REJECT CRITERIA IS ACCEPT ON (0) DEFECTS AND REJECT THE ENTIRE LOT ON (1) DEFECT. EVEN THOUGH THE ACCEPTANCE LEVEL IS ELIMINATED, THE SAMPLE SIZE REMAINS THE SAME.

ADEQUATE DATA FOR THE EVALUATION OF ALTERNATE OFFERS IS NOT AVAILABLE AT THE PROCURMENT AGENCY. THE OFFEROR MUST PROVIDE A COMPLETE DATA PACKAGE INCLUDING DATA FOR THE APPROVED AND ALTERNATE PART FOR EVALUATION. THIS IS FOR SOLICITATION PURPOSES ONLY AND DOES NOT APPLY FOR AWARD.

"ANY TECHNICAL DATA PROVIDED AS A RESULT OF THIS SOLICITATION IS NOT COMPLETE AND WILL BE PROVIDED FOR REFERENCE PURPOSES ONLY."

CRITICAL APPLICATION ITEM

PARKER HANNIFIN CORPORATION

(92003) P/N 1471-559374

CONTINUED ON NEXT PAGE

SECTION B

ITEM	PR	PRLI	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	YPE04007000511	0001	15	EA	\$359.64000	\$5394.60

QTY VARIANCE: PLUS 0% MINUS 0%
INSPECTION POINT: ORIGIN
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = 41: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = 00: CUSH/DUNN MAT = NA: CUSH/DUNN THKNESS = X:
UNIT CONT = D3: OPI = O:
INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:
PACK CODE = U:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH
MIL-STD-129 (LATEST REVISION) MARKING AND BAR
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: ORIGIN BY: 2004 SEP 13

PARCEL POST/FREIGHT ADDRESS:

SW3227
DEF DIST DEPOT RED RIVER
RECEIVING BLDG 499
10TH STREET AND K AVENUE
TEXARKANA TX 75507-5000

NON-MILSTRIP
PROJ CI1

REMIT PAYMENT TO:
